

15750 U.S. PTO
08/01/03

PTO/SB/05 (07-03)

Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	300 P 001
	First Inventor	Robert J. Petcavich
	Title	Process and Coating Composition For Extending the Shelf Life of Post....
	Express Mail Label No.	EL 908815054 US

03913 U.S. PTO
10/633207
08/01/03

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>9</u>] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>0</u>] 5. Oath or Declaration [Total Sheets <u> </u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information:

Examiner

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number:	28264	OR <input checked="" type="checkbox"/> Correspondence address below
Name	Michael P. Williams	
Address	One Lincoln Center	
City	Syracuse	State NY Zip Code 13202-1355
Country	Telephone	Fax 315-218-8100
Name (Print/Type)	Michael P. Williams	Registration No. (Attorney/Agent) 43,271
Signature	<i>Michael P. Williams</i>	Date Aug 1, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



BOND, SCHOENECK & KING, PLLC

ATTORNEYS AT LAW ■ NEW YORK FLORIDA KANSAS

MICHAEL P. WILLIAMS
Direct: 315-218-8176
mwilliams@bsk.com

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

August 1, 2003

Applicant: Agway, Inc.

Title: PROCESS AND COATING COMPOSITION FOR
EXTENDING THE SHELF LIFE OF POST
HARVEST PRODUCE

Reference No.: 307331

Docket No.: 300 P 001

Dear Sir/Madam:

Enclosed are the following:

1. Utility Patent Application Transmittal;
2. Fee Transmittal;
3. Nine (9) pages of Description;
4. Two (2) pages of Claims;
5. One (1) page Abstract;
6. Information Disclosure Statement;
7. PTO Form SB/08A; and
8. Nineteen (19) cited references.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Services on the date shown below as Express Mail-Post Office to Addressee under 37 CFR 1.10 in an envelope addressed Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450


Marie J. Parr

Marie J. Parr
Date: August 1, 2003

August 1, 2003
Page 2

Also enclosed is our check in the amount of \$790 for filing fees of the attached utility patent application. The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account 50-1546.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Michael P. Williams", written over a horizontal line.

Michael P. Williams
Registration No. 43,271
Bond, Schoeneck & King, PLLC
Attorneys for Applicant

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (05-03)
Approved for use through 04/30/2003. OMB 0651-0032
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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>		Complete If Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		Filing Date	
		First Named Inventor Robert J. Petcavich	
		Examiner Name	
		Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$) 790.00	
		Attorney Docket No. 300 P 001	

<h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check all that apply)</h3> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p> <input type="checkbox"/> Deposit Account: Deposit Account Number 50 1546 Deposit Account Name Bond, Schoeneck & King, PLLC </p> <p> The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p> <h3 style="text-align: center; margin: 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px;"> <h4 style="margin: 0;">1. BASIC FILING FEE</h4> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code (\$)</th> <th style="text-align: left;">Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1001 750</td> <td>2001 375</td> <td>Utility filing fee</td> <td style="text-align: right;">750.00</td> </tr> <tr> <td>1002 330</td> <td>2002 165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 520</td> <td>2003 260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 750</td> <td>2004 375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 160</td> <td>2005 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$) 750.00</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <h4 style="margin: 0;">2. 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SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Michael P. Williams	Registration No. (Attorney/Agent)	43,271
Signature	<i>Michael P. Williams</i>	Telephone	315-218-8176
		Date	Aug 1, 2003

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